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| OMAHA, NE 6 | | l | Michele Zarinelli /Michele Zarinelli/ September 5, 2006 | | | (Depositor's name) | | |
| , | | | | | | (Signature) | | |
| | | l | | | | (Date) | | |
| APPLICATION NO. FILING DATE | | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. | |
| 10/816,735 TITLE OF INVENTION | 04/02/2004 N: METHOD AND API | PARATUS FOR INCR | - | Michael Jay Nelson 34000/008 1390 ASING THE RELIABILITY OF AN EMERGENCY CALL COMMUNICATION | | | | |
| | | | - | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE D | JE PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | \$300 | \$0 | | \$1700 | 11/27/2006 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | | |
| WOO, STELLA L 2614 | | 2614 | 379-045000 | | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (1) the names of u or agents OR, alten (2) the name of a s registered attorney 2 registered patent | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
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| Intrado I | | - | Longmont, Colorado | | | | | |
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| | ntus (from status indicate | | ☐ b. Applicant is no | longer claiming SMA | LL EN | TITY status. See 37 C | FR 1.27(g)(2). | |
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| | /David Clayton/ | Date September 5, 2006 | | | | | | |
| Typed or printed nan | David Clayton | | Registration No. 27,318 | | | | | |
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